

FAO	Use	Only:	□ Dep	Ind
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Financial Aid Office P.O. Box 501250; Saipan MP, 96950 (670) 237-6791/2/3/4 fao@marianas.edu

## Northern Marianas College Financial Aid Office

Your application for federal financial aid was selected for review in a process called "VERIFICATION" which requires that we compare information from your FAFSA with signed copies of your Federal tax forms, W-2 forms and/or other financial documents. If there are differences between your application and your financial documents, corrections will need to be made to your application and your information will be reprocessed.

You must complete and sign this worksheet and submit it along with any documents requested below. We cannot continue processing your financial aid application or award financial aid until verification has been completed. Contact the Financial Aid Office (670-237-6791/2/3/4) if you need assistance. **Do not leave any space blank. If an item does not apply to you, enter zero.** 

ast Name	First Name	N	M.I		Suffix		Student ID Number	
ddress	City EHOLD INFORMATION	S	tate	Zip		-	Date of Birth	Phone Number
DEPENDENT STUI include the following • yourself and your pa • your parents' other c support from July 1, 2 required to provide parand • other people if they r than half of their supp	DENTS: List the people in	tepparent), and de more than ha (b) the children g for Federal Sto your parents pro	alf of their would be udent Aid, ovide more		include the for yourself and your children July 1, 2021 th and other people their support a	ollowing your spo n, if you p nrough Ju if they n and will co	g: buse, if married, brovide more than half une 30, 2022, low live with you, and y	ple in your household; of their support from you provide more than half of their support
	ull Name	Age	Relat	ionsh	ip	_		ing or will attend at 7/1/21 and 6/30/22
2.			_				_	_
3.								
5.								
6.       7.								
8. STUDENT'S (AN	ND SPONSE'S) TAVEO	DMC AND I	NCOME INFO	- DMA1	TION .			
1. Please check one	e of the following: and spouse) 2019 1040 Tax att					)T REQU	IRED to file a 2019 10	40 Tax Return. (See No. 2 beld
	ouse (if married) did not file an		ired to file a 2019	1040 T	Tax, list below	your em	iployer(s) and any inc	ome received in 2019.



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	Northern Marianas College Financial Aid Office		
D. PARENT(S)	TAX FORMS AND INCOME INFORMATION (FOR DEPENDENT STUDENTS)		
1. Please check o	ne of the following:		
Parents' 201	9 1040 Tax attached. Parents will NOT file and are NOT REQUIRED to file a 2019		
	1040 Tax. (See No. 2 below)		
	s) did not file and are not required to file a 2019 1040 Tax, list below your parent(s)' emp W-2 form or other earnings statement)	loyer(s) and any in 2019 amount	come received in 2019
Sources (Ose the	w-2 form of other earnings statement/	2013 amount	
	UNTAXED INCOME		
	CALENDAR YEAR 2019		
Parent (s)		Studer	nt (and Spouse)
\$	Child Support <b>RECEIVED</b> for all children. Don't include foster care or adoption pa	nyments	\$
ć	Housing, food, and other living allowance paid to members of the military, c	lergy, and	\$
\$	others (including cash payments and cash value of benefits).		7
	Any other untaxed income or benefits not reported elsewhere, such as worker's disability, etc. Also include first time homebuyer tax credit from IRS form 1040 li	•	
\$	Don't include student aid, Workforce Investment Act educational benefits, con		\$
7	benefits from flexible spending arrangements, e.g. Cafeteria Plans, Social Secu	,	
	SSI, Welfare payments.		-
\$	Money <b>received</b> , or any paid on your behalf (e.g. bills), not reported elsewhere on the	is form.	\$
	ADDITIONAL FINANCIAL INFORMATION		
Damant (a)	CALENDAR YEAR 2019	Character of	-t (l C)
Parent (s)	Child Support <b>PAID</b> because of divorce or separation. Do not include support fo		nt (and Spouse)
\$	your (or your parents') household, as reported on the FAFSA.	Ciliaren in	\$
If Child Support Paid:	Paid to (Parent's Name) :		
If Child Support Paid:	Paid for (Child (ren) Name) :		
	Taxable earnings from Federal Work-Study or other need-based work programs.		
\$	Taxable carriings from Federal Work Study of other fieed based work programs.	•	\$
\$	Student grant, scholarship, fellowship, and assistantship aid, including AmeriCorps A reported to the IRS in your (or your parents') adjusted gross income.		\$

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Date

Parent (Required for dependent student)

RETURN THIS ALONG WITH REQUESTED SUPPORTING DOCUMENTS:
Northern Marianas College, Financial Aid Office

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